## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000007069

Entity Name: THE WORSHIP TARERNACLE

FILED Feb 01, 2007 Secretary of State

Entity Nai	me: THE WO	RSHIP TABERNACLE, INC.					
Current P	rincipal Place	of Business:	New Principal Place of Business:				
12350 SW SUITE # 10 MIAMI, FL							
Current Mailing Address:			New Mailing Address:				
12350 SW SUITE # 10 MIAMI, FL							
FEI Number: 20-1386228 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired ( )			esired ( )	
Name and	l Address of C	Current Registered Agent:	Name and	Address of I	New Registered Age	nt:	
SUITE # 10	' 132ND CT						
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	office or registered ag	ent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Age			ent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D ( ) MACHIN, DORI 9609 SW 138 A MIAMI, FL 331	NVE.	Title: Name: Address: City-St-Zip:	D (X MACHIN, DOR 22618 SW 94 MIAMI, FL 331	PATH		
Title: Name: Address: City-St-Zip:	D ( ) BRITO, TANIA 15364 SW 32 I MIAMI, FL 331		Title: Name: Address: City-St-Zip:	D (X BRITO, TANIA 2237 PORTOF HOMESTEAD,			
Title: Name: Address: City-St-Zip:	D ( ) MARIN, IDANIA 12254 SW 148 MIAMI, FL 331	TERR.	Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address: City-St-Zip:	D ( ) CARRASQUILL 5201 NW 7 ST. MIAMI, FL 331	#317	Title: Name: Address: City-St-Zip:	D (X CARRASQUILL 9411 SW 227 MIAMI, FL 331	LN		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IDANIA MARIN D 02/01/2007